

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000064462

**Entity Name:** T & R CUSTOM HOMES, LLC

**FILED**  
**Feb 15, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

172454 BAY RD  
HILLIARD, FL 32046

**New Principal Place of Business:**

**Current Mailing Address:**

172454 BAY RD  
HILLIARD, FL 32046

**New Mailing Address:**

FEI Number: 20-3073780      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TESTONE, WILL A  
172454 BAY RD  
HILLIARD, FL 32046 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: TESTONE, WILL A  
Address: 172454 BAY RD  
City-St-Zip: HILLIARD, FL 32046

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: HALL, RONALD D SR.  
Address: 85712 AVANT ROAD  
City-St-Zip: YULEE, FL 32097

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILL A TESTONE

DP

02/15/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date